



Review Tool

ABSTINENCE EDUCATION PROGRAM

Federal Fiscal Year 2004
Competitive Request for Proposals (RFP)
RFP B02 0001.1

Application Due Date: June 30, 2003

Grant Application Review Tool

Applicant Name: _____ **Score:** _____

Funding request: _____

Reviewer name: _____ **Date:** _____

George McCleskey, B.B.A., J.D.
Chair, Texas Board of Health

Eduardo J. Sanchez, M.D., M.P.H.
Commissioner

1. Organization Capacity for Program Implementation

Program Review Criteria:

The applicant's capability to implement the planned Abstinence Education activities.

Form F, page 24. 10 points maximum. Response is limited to 1 page. Staff and organization charts or job descriptions may be included in the appendices.

Criteria	Maximum Points	Points Given	Comments
Agency has history of providing services to same or similar populations.			
Descriptions of successes stated in terms of client outcomes, i.e., changes in risk behavior, reduced pregnancy rates, STDs, decreased alcohol/drug use, etc			
Description of agency conveys potential to address performance measures.			
Staff job descriptions & qualifications match duties, & duties of staff appropriate to project objectives.			
Total points	10		

2. Community Partners and Organizational Support

Program Review Criteria:

The applicant's plan for community partnerships. The partners should provide detailed descriptions of their participation and support to serve the priority populations.

Form G 15 points maximum. Page 25. Response is limited to 2 pages, not including letters or MOU's of support (in the appendix).

Criteria	Maximum Points	Points Given	Comments
Applicant's plan for leadership includes community support in reaching and serving priority populations.			
Description of key partners role in success within the community to be served.			
A variety of community partnerships exist, with strong community presence and improved opportunity for success. (Score as 3 if five or more documented community partnerships.)			
MOU's or support letters indicate partnerships that share goals with the applicant, and <u>detail</u> their participation in and support of the program.			
Community partnership roles are included in the work plan.			
Total points	15		

3. Accessing Priority Populations

Program Review Criteria:

The extent to which priority populations will be accessed and served. Priority populations include teens at risk for pregnancy and sexually transmitted infections. Parents and others most likely to have an impact on state and federal performance measures are priority populations as well as geographic areas that are unserved or underserved by abstinence education.

Form H 10 points maximum. Page 26. Response is limited to 3 pages.

Criteria	Maximum Points	Points Given	Comments
Description of how priority populations will be reached through existing or planned partnerships in the community.			
If outreach (media, billboards, public awareness strategies, etc) is done to recruit clients: what is the expected success in reaching the priority population and , if reached, will enroll in program activities? (Score as 2 if program will use partners or other strategies other than outreach through media.)			
Applicant will use varied approaches (in-reach, partnerships, government, faith based, community resources, referrals, etc) to reach priority populations.			
Documents the impact that abstinence education will have on the priority populations and on state and federal performance measures (page 4).			
Description of the geographic area. If the area is unserved or underserved (no other abstinence contractor in the area).			
Total points	10		

3. Accessing Priority Populations (continued)

Applicants are instructed to complete a **Form E** (Description & Objectives of Priority Population) for each priority population to be served. Priority populations are defined as teens most at risk for pregnancy and STDs, parents & others most likely to have an impact on performance measures. Clients should be engaged in (at minimum) a four session, curriculum based program. Activities that are not curriculum based should have learning objectives. One-time events, with the exception of parent education seminars, are to be kept to a minimum. Clients are counted only once during the year, to be considered unduplicated.

Form E 10 points maximum. Page 22.

Criteria	Maximum Points	Points Given	Comments
Priority clients to be served:			
High risk youth (drug/alcohol, drop out, or other risk behavior)			
<u>OR</u>			
In school youth < age 18			
After school youth < age 18			
Total points			
Parents/caregivers			
<u>OR</u>			
School staff, other professionals			
Total points			
Has minimum 4 to 1 ratio of Encounters per client			
<u>OR</u>			
Has greater than 5 to 1 ratio of encounters per client.			
<u>OR</u>			
Has minimum of 1 X only events not associated with curriculum.			
Total points	10		

Total points all priority clients served Form E: _____

4. Curriculum and Curriculum Checklist

Program Review Criteria:

The implementation and use of curriculum for the priority populations, the expected outcomes and duration of the curriculum, with adherence to the Federal definitions of Abstinence Education.

Form I, 10 points maximum. Page 27. Response is limited to 1 page. A curriculum checklist should be completed for each curriculum to be used, or a copy of learning objectives for all presentations that are planned.

Criteria	Maximum Points	Points Given	Comments
Description of curricula, use, background with priority populations.			
Clear explanation of expected outcome of curriculum, behaviors to be changed, etc.			
Majority of program & activities have multiple or ongoing sessions for each priority population.			
Description of protocol to be used when more than one curriculum is used for the same group.			
Curriculum checklist included for all curriculum to be used.			
Checklist shows that applicant agrees with items A, B, and C and the curricula to be used meet many of the Federal definitions (1-8 of checklist) explicitly or implicitly.			
Total points	10		

5. Evaluation/Quality Assurance Plans (Form J)

Program Review Criteria:

The applicant's plan for implementation of quality assurance and evaluation of program success. The applicants capability to adhere to state performance measures and federal policy guidelines

Form J 10 points maximum. Page 29. Response is limited to 2 pages, not including copies of forms to be used, included in the appendix.

Criteria	Maximum Points	Points Given	Comments
Description of quality assurance plans:			
Client pre/post tests			
Parent permission slips			
Client satisfaction surveys			
Client tracking systems			
Oversight plans for educators			
Plans for contract compliance			

Detailed plans for compliance with TDH policies and Title V's copyright restriction.			
Detailed information of how client outcomes will be evaluated, who will complete it, and what strategy is being used to implement it.			
Total points	10		

5. Work Plans and Data Outcomes (Form K)

Program Review Criteria:

The applicant's work plan and the impact on priority population. The work plan's clearly identified activities that will meet the state and federal performance measures.

Form K, 35 points maximum. Pages 30-36. Limit response to 2 pages for each performance measure to be addressed.

Criteria	Maximum Points	Points Given	Comments
Contractor performance measure objective (#3 on work plan) is appropriate and should have an impact on state & federal performance measures			
The data source that is used for the work plan is a reliable data source ("Indicators of sexual activity in TX youth", TX Education Agency). If other data is cited, it should be thoroughly referenced.			
Work plans include activities for all priority population the applicant proposes to serve. (Forms E & H)			
The total number of priority clients to be served by the applicant is realistic and is a percentage of the total population.			
Activities are clearly defined and specific.			
Activities are directly related to the contractor performance measure objectives.			
Agency/staff and community partners' role is included in the work plan.			
Timeline information regarding the frequency, duration of activities is clearly defined and planned. Timeline reflects ongoing client services.			
Total points	35		

7. Budget

Program Review Criteria:

The applicant's budget request that correlates to work plan activities, reasonable and appropriate costs and expenditures, and demonstrates the capacity for match funding.

Forms O-1 thru O-8, 25 points maximum. Pages 43-68.

Criteria	Maximum Points	Points Given	Comments
Budget summary Form O-1 is complete and correlates to budget detail forms.			
Budget request detail for administrative personnel is less than 10% of TDH funds requested. Personnel and fringe costs are in line with other similar industry costs.			
Applicant match detail is 50% or more, appropriate and attainable.			
Equipment/supply costs are appropriate and justified and support activities listed on work plans.			
Majority of budget request is for direct client services.			
Contractual request is reasonable and not more than \$25,000 or 25% of budget request. Detail form specifies who is performing service, units/hours, frequency and justification for use of contract.			
Indirect and 'other' costs are fully justified. Indirect costs are less than 10% of personnel costs.			
All budget detail requests should reflect or support work plan activities.			
Total points	25		

Applicant Score Totals

Applicant Name: _____

Criteria	Maximum Points	Points Given	Improvement or issues to be discussed if approved for funding
1. Organization Capacity for Program Implementation (Form F)	10		
2. Community Partners and Organizational Support (Form G)	15		
3. Accessing Priority Populations (Forms H & E)	20		
4. Curriculum and Curriculum Checklist (Form I)	10		
5. Evaluation/Quality Assurance Plans (Form J)	10		
6. Work Plans and Data Outcomes (Form K)	35		
7. Budget (Forms O-1 thru O-8)	25		
Total points	125		

Funding Recommendation:

_____ Funding recommended

_____ Funding recommended, with revisions (as stated above)

_____ Not recommended for funding, summary:

Reviewer name: _____

Review date: _____

